



STATE OF WASHINGTON
DEPARTMENT OF HEALTH
Olympia, Washington 98504

**WASHINGTON STATE BOARD OF PHARMACY
MEETING MINUTES**

March 11, 2010

Department of Health Kent Offices
Marketing Center Creekside Three
at CenterPoint

20435 72nd Ave S, Suite 200 Conference Room 1
Kent, Washington 98032

CONVENE

Chair Gary Harris called the meeting to order at 9:03 a.m., March 11, 2010.

Board Members present:

Gary Harris, RPh, Chair
Albert Linggi, RPh, Vice Chair
Vandana Slatter, PharmD
Dan Connolly, RPh
Christopher Barry, RPh
Rebecca Hille, BA-Public Member

Staff Member present:

Joyce Roper, AAG
Susan Teil Boyer, Executive Director
Grant Chester, Chief Investigator
Greg Lang, Investigator
Cathy Williams, Pharmacist Consultant
Tim Fuller, Pharmacist Consultant
Doreen Beebe, Program Manager
Leann George, Program Support

Guest / Presenters:

Paula Meyer, Executive Director
of Nursing Commission
Chuck Cumiskey, Practice Advisor
for Nursing Commission
Kitty Slater, Compliance Officer for
the Board of Pharmacy
Michaelene (Micki) Kedzierski, RPh, CDP
William Rhodes, MSW, CDP, MHP
WRAPP Monitoring Program Manager
Leon Alzola, Chair of WRAPP
Michael Marr, BS pharm, Pharm.D
Dianna Gatto, Good Samaritan Hospital
Jeff Stimson, Good Samaritan Hospital
Mindy Collins, Local Source Control Specialist
City of Bellingham, Public Works Dept
Denise Jason, Compliance Officer for Genoa
HealthCare

CONSENT AGENDA

- 1.1** Pharmacy & Other Firm Application Approval.
 - New Pharmaceutical Firms -01/06/2010- 02/23/2010
- 1.3** Automated Drug Dispensing Device Acceptance.
 - Columbia Basin Hospital
- 1.5** Board Minute Approval. (January 21, 2009)

Items listed under the consent agenda are considered to be routine agency matters and will be approved by a single motion of the board without separate discussion. If separate discussion is desired, that item will be removed from the consent agenda and placed on the regular business agenda. **Items 1.2 and 1.4** have been **deleted** from the agenda.

MOTION: Dan Connolly moved that the board approve items 1.1, 1.3 and 1.5. Rebecca Hille second. **MOTION CARRIED: 5-0.**

REPORTS

Board Member

Chris Barry reported:

- February 25, 2010 Christopher Barry was confirmed at the Senate Health and Wellness Committee. He was asked a number of questions and did a great job representing the board.

Gary Harris reported:

- Mr. Harris was reconfirmed on February 25, 2010 but did not attend.
- He has been on 2 more meet me calls. There were several weeks that the meet me calls were cancelled because there were not any new bills.
- Gary wrote emails to two representatives and the state senator regarding a couple of bills.

Al Linggi reported:

- He was in contact with American Society of Health System Pharmacist (ASHP). Mr. Linggi shared information with Susan Teil Boyer regarding the government affairs committee and how government affairs nationally and state wide coordinate with Boards of Pharmacy. He hopes the board will be updated monthly.
- Al volunteered to serve on a mission to Honduras. There were 3 Pharmacists, 9 physicians, 2 dentists and 22 nurses. They created a formulary of about 90 drugs. These drugs were labeled, with expiration dates, in Spanish. The volunteer health care givers saw about 2,300 patients and filled about 9,000 prescriptions. This was his second experience and it continues to be a meaningful experience.
- University of Washington has a practice board and they will be having a meeting May 27, 2010. There are about twenty members from all practice settings. Al suggested that Susan Teil Boyer attend this meeting.

Executive Director

Susan Teil Boyer reported:

- The Tamper Resistant webpage was posted the week of February 22, 2010, a press release to the media was also distributed, a newsletter article went to Washington State Pharmacist Association (WSPA) and Washington State Medical Association (WSMA)

and Tips for Tamper Resistant Prescription Pad has been posted to the professional listserv's for prescribers. Subsequent to the press release, the Everett Herald, Seattle Times, News Tribune and other news papers picked up the story. Donn Moyer and Susan Teil Boyer were interviewed for radio stories on this topic.

- Chris Barry and Gary Harris were confirmed by the Senate Health and Wellness Committee February 25. Chris Barry answered questions regarding pharmacy issues and well represented the board.
- Legislative bills affecting pharmacy and health care.
 - Uniform Controlled Substances Act
 - Incorporates carisoprodol as schedule IV
 - This bill aligns and conforms the state CSA to the Federal CSA
 - Electronic tracking of pseudoephedrine, ephedrine, phenylpropanolamine
 - This bill creates a public/private contract to provide software to all pharmacies and shopkeepers who sell these products. The bill requires rulemaking and implementation of the program statewide
 - Out of state ARNP prescribers
 - Pharmacists will be able to accept legend drug prescriptions written from out of state
 - Pain Management Education for prescribers
 - Education will be developed for prescribers and we will want to have a pharmacist on the workgroup.
- Susan also presented a law update with Grant Chester at the annual law seminar held at University of Washington School of Pharmacy January 24, 2010.
- On January 30, she presented a board of pharmacy update to the WSPA board. This was a constructive and productive discussion.
- Hospital Pharmacy Rule first stakeholder meeting with Hospital Pharmacy Director group (WSPA) set for April 30, 2010, Valley Medical Center.
- Jim Doll, Jim Lewis, Susan Teil Boyer reviewed and edited the Jail Medication Model Policy and returned the document to Washington Association of Sheriff and Police Chiefs (WASPC).

Assistant Attorney General

Joyce Roper reported:

- On February 12, 2010 new dates were set for trial and all other events that occur before trial regarding the Stormans' case. The Stormans' plaintiffs acknowledged that there is no need for more discovery. Dates were set to file Summary Judgment motions. A Summary Judgment motion is a request to the judge to resolve the case without trial, because there are only legal issues, no factual issues in the case. . If the case does not get resolved on Summary Judgment then the trial will begin July 28, 2010.

Consultant Pharmacists

Cathy Williams reported:

- February 4, 2010 Cathy attended the final meeting of the Agency Medical Directors Group (AMDG) Opioid Guidelines Workgroup which is updating the guidelines for publication in June.

- Cathy Williams, Stan Jeppesen and Tom Hazlet assembled review questions to help in preparation for the Multistate Pharmacy Jurisprudence Examination, some easy, some hard. PHARM 544 Survey of Pharmacy Laws met Saturday, February 27 & Saturday March 6, 2010.

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Tim Fuller reported:

- On February 5, 2010 carisoprodol became a Schedule IV control substance in Washington State. A detailed communication plan was implemented and there have been surprisingly few questions.
- Tim participated in Pharmacy Legislative Day along with Mary Selecky, Karen Jensen and Steve Saxe.
- On February 8, 2010 Washington State University Extern Will Quinby began a 6 week rotation with the board. Will's father is a pharmacist in Aberdeen and he wants to have his own pharmacy in the future. At this time Will has spent time in the field with four of the board investigators and is working on projects for both Mr. Fuller and Grant Chester.
- He prepared the CR101 and Cover Memo for the Hospital (Health-System) rule revision. The National Association of Boards of Pharmacy Model Act and recent state hospital pharmacy rules are being used in the revision process. Expect to have the first stakeholder meeting in April.

Chief Investigator

Grant Chester reported:

- Grant compiled a list of the pharmacy robberies in Washington State during 2009. His list is 1 different (87) from the official DEA list (86).
- January 24, 2010 Grant and Susan Teil Boyer presented at the New Drug Laws and Care Management Seminar held at the University of Washington, School of Pharmacy.
- February 5, 2010 Jim Doll held a presentation at Pacific Lutheran University on the subject of Safely and Legally Prescribing Controlled Substances.
- February 27, 2010 Stan Jeppesen and Cathy Williams presented at the University of Washington Pharmacy Law Class.

Program Manager

Doreen Beebe reported:

- She has been working hard on Tamper Resistant Prescription Pads approval process. There are forty-six approved vendors, twenty-one pending applications. She commented that 100% of the applications require follow-ups.

DISCUSSION

WRAPP

Micki Kedzierski, William Rhodes and Stan Jeppesen shared some background information on the Washington Recovery Assistance Program for Pharmacy (WRAPP). They are asking the board to discuss the Washington Recovery Assistance Program for Pharmacy guidelines on reporting non-compliance.

The WRAPP Guidance document will assist WRAPP and the Board of Pharmacy with guidance and insight when processing individuals and their cases under the Impaired Pharmacist Rehabilitation Rule or WAC 246-867. It also addresses the important reporting of alcohol use and the below threshold incidents. The reporting of these below threshold incidents takes time and resources from the Board of Pharmacy. The goal of WRAPP is to clarify and reduce the reporting of the below threshold incidents.

Leon Alzola, Chair of WRAPP ended this discussion with a summary. He asked that the board notify WRAPP when a pharmacist is board ordered to the program. Discipline appropriately when the board is notified of non-compliance. Consider allowing credit to time spent in the program before ordered into the program. Arrange for orientation and training on the program between WRAPP and the board.

MOTION: Dan Connolly moved that the board implement the recommended guidelines on reporting non-compliance from Washington Recovery Assistance Program for Pharmacy. Rebecca Hille second. **MOTION CARRIED: 5-0.**

Al Linggi asked that board staff and WRAPP work together on developing an algorithm for the board to be more consistent with the actions taken on non-compliance.

Request for Board's Opinion

The Spokane County Jail asked the Nursing Commission and the Pharmacy Board for a formal opinion on the practice of allowing nurses to authenticate inmates' own medications brought into the Spokane County Jail by family or friends. Paula Meyer, Executive Director of the Nursing Commission attended the board meeting to hear the discussion and to take the issue to the Nursing Commission March 12, 2010.

During this discussion the board agreed that this would not be a safe practice nor in the best interest of the patient/inmate. The Board of Pharmacy does not have authority over jails or nursing practice. The board will respond with the Nursing Commission to this particular letter on whether this should be allowed. The board may also provide opinions with some options.

MOTION: Dan Connolly recommended that the Spokane County Jail contract with a pharmacist consultant for identifying drugs and for other medication policy review. Vandana Slater second. Christopher Barry offered a friendly amendment that we disallow the practice. After further discussion this motion was restated.

RESTATED MOTION: Christopher Barry moved that the practice of authenticating inmates' own medications brought into the Spokane County Jail by family or friends as defined in the letter is not acceptable. The board recommends that Spokane County Jail contract with a pharmacist consultant to develop a policy and procedure to ensure patient safety and prevent diversion. Al Linggi second. **MOTION CARRIED: 5-0.**

2010 Legislative Updates

- **SHB 2443** Uniform Controlled Substances Act (CSA).
 - Incorporates carisoprodol as schedule IV.

- This bill aligns the state CSA to the Federal CSA.
- **HB 2961** Electronic tracking of pseudoephedrine, ephedrine, phenylpropanolamine
 - This bill creates a public/private contract to provide software to all pharmacies and shopkeepers who sell these products. The bill requires rulemaking and implementation of the program statewide.
- **SB 6627** Out of state ARNP prescribers
 - Pharmacist will be able to accept prescriptions written from out of state and bordering Canadian provinces for legend drugs.
- **ESHB 2876** Pain Management Education for prescribers
 - Education will be developed for prescribers and we will want to have a pharmacist on the workgroup.

Sample Drug Guidelines

Cathy Williams led the discussion to the board asking them to consider a final version of the Sample Drug Dispensing Guidelines. Cathy incorporated the feedback from the board given during the December 10, 2009 meeting.

MOTION: Christopher Barry moved that the board approve the amended Sample Drug Dispensing Guidelines. Rebecca Hille second. Dan Connolly opposed. **MOTION CARRIED: 4-0.**

Stickerless Prescription Files

Grant Chester provided a matrix of information the board requested for their consideration to initiate rules to allow Washington pharmacies to utilize an electronic process for recording and maintenance of prescription data as required under WAC 246-869-100. This applies to legend non-controlled substance drugs only.

MOTION: Dan Connolly moved that the board approve the recommendation as presented and proceed with rulemaking in WAC 246-869-100. **MOTION CARRIED: 5-0.**

PRESENTATIONS

Pharmacy Technicians Trained to Take Patient Medication List

Michael Marr presented a proposal to the board for Providence St. Peter Hospital. He asked the board to consider allowing trained pharmacy technicians to interview patients to obtain a medication list.

Overview:

Medication reconciliation process

- At entry, obtain and document medication list.
 - ✓ Complete and accurate list will improve safety.
 - ✓ List will be obtained at point of entry to hospital.
- List should be obtained by persons familiar with:
 - ✓ Drug names, strengths, dosage forms and directions for use.
 - ✓ Pharmacist

- ✓ Pharmacy technicians

Pharmacist Technicians are effective

- Several institutions in the area utilize technicians for medication reconciliation.
 - ✓ Familiarity with medications.
 - ✓ Work under direct supervision of pharmacist.
 - ✓ Cost effective.

Educating Pharmacist Technicians to obtain medication lists

- Pharmacist taught education session.
 - ✓ Process to obtain list.
 - ✓ Interview techniques.
 - ✓ Completion of training with competency exam.
 - ✓ Pharmacist/Pharmacist Technician shadowing.
 - ✓ Training with supervision until deemed competent.
 - ✓ Minimum shadowing for three hours.

Workflow

- Patient enters hospital through emergency department.
- Pharmacy technician obtains medication list through patient interview.
- Pharmacist reviews medication list for accuracy and completeness.
- Pharmacist approves it by signing off.
- Physician reviews list and reconciles medication.

Summary

- Patient safety is the primary goal.
 - ✓ Medication list must be complete and accurate in order to be successful.
 - ✓ Trained pharmacy technicians are able to obtain accurate medication lists.
 - ✓ Pharmacist oversight and review will be conducted for each medication list.

MOTION: Vandana Slater moved that the board approve Providence St. Peter Hospital's request to allow trained pharmacy technicians to interview patients to obtain a medication list. Providence St. Peter Hospital is to report back to the board in 1 year and work with Tim Fuller on developing policy and procedures. Rebecca Hille second. **MOTION CARRIED: 5-0.**

Good Samaritan Hospital Update

Dianna Gatto and Jeffery Stimson from Good Samaritan Hospital presented a follow-up on its process implemented for using specially trained pharmacy technicians to obtain medication lists for emergency department and hospitalized patients.

Follow up on process for technicians obtaining medication lists:

Where/when list is obtained

- Emergency Department
 - ✓ Lists obtained 7 am to 2 am seven days per week.
 - ✓ ED pharmacist verifies each list.
- Direct admissions
 - ✓ Pharmacist's request technicians obtain lists on direct admits.
 - ✓ Technicians go to floor, obtain list, verify with decentralized pharmacist.

Number of technicians and lists obtained

- ✓ Eight specially trained technicians participate in process.

- ✓ Med lists per month: average 466*.
- ✓ Med lists per day: average 15.5*.
- ✓ Time to obtain: average 17 min per list.

Feedback, pharmacist, physician

- ✓ Pharmacists agree this saves time on unknown medications.
- ✓ Nurses appreciate this help, saves time and the patient does not have to be asked more than once.
- ✓ Physicians love this.

Lessons learned

- Obtaining accurate lists
 - ✓ Discrepancies between Rx bottle and patient.
 - ✓ Patient and mental health.
- Documentation
 - ✓ Computer issues, Word document files.
 - ✓ Documentation of number obtained per day.
- Other
 - ✓ Storage of home medications.

Conclusion

- At Good Samaritan, trained pharmacy technicians are obtaining complete and accurate medication lists with pharmacist oversight and review.
- Our medication reconciliation process is successful with the addition of specially trained technicians.

Guideline for Pharmacy Technicians Trained to Take Medication List

Tim Fuller presented a draft guideline to establish standards for utilization of pharmacy technicians to collect a patient medication list to the board for their review. He answered questions from the board. Tim asked for feedback from the board regarding this guideline draft.

After some discussion Mr. Fuller was asked to put some added focus on the Quality Assurance piece of this draft. Christopher Barry recommended that Mr. Fuller send hospitals that are using pharmacy technicians to obtain medication list, the draft guidelines for their review and ask for feedback.

Bellingham Pharmaceutical Waste Program Proposal

Stan Jeppesen asked the board to consider a proposal by Bellingham Waste Water Program for collection of pharmaceutical waste.

City of Bellingham Protocol Background:

- ✓ The Bellingham protocol follows the protocols approved by the board for the PH:ARM pilot where waste drugs are collected in a secure container system.
- ✓ Prescreening of material to be collected has been shown to prevent the collection of prohibited material, to include controlled substances. The Bellingham program will continue to prescreen all material

City of Bellingham Protocol Attributes:

- ✓ All collection sites will be located at Bellingham licensed retail community pharmacies. Five (5) sites are initially proposed for initial implementation. Five (5) additional pharmacies are anticipated for the future.
- ✓ The program will utilize two person witnessed access and transfer of all material.
- ✓ Pharmacy staff is not allowed to physically handle the collected material. Pharmacy staff will visually inspect all material prior to consumer deposit and reject any material not allowed under the protocol.
- ✓ Controlled substances are not allowed for collection.
- ✓ Consumers will deposit their own material after material inspection by pharmacy staff.
- ✓ All collected material will be tracked from the collection site to ultimate destruction.
- ✓ Ultimate destruction will be via a licensed Reverse Distributor.
- ✓ Security of all collected material will be maintained at licensed facilities.
- ✓ The secure collection containers are manufactured by dVault for the purpose of collecting waste pharmaceuticals with dual key access, of the type previously approved by the board and utilized in previous collection programs.
- ✓ The protocol requires internal assessment to identify operating compliance with the protocol.
- ✓ Full unrestricted inspection is allowed by the Washington State Board of Pharmacy and law enforcement.

The City of Bellingham, Public Works Department, is willing to provide the board with an operational program update, at a time of the board's request.

MOTION: Christopher Barry moved that the board approve the request from Bellingham Waste Water Program for collection of pharmaceutical waste for a three year period. This allows the five initial pharmacies and up to five additional sights. The Board of Pharmacy Executive Director and board staff can make minor modifications as required. Vandana Slater second.

MOTION CARRIED: 5-0.

EXECUTIVE SESSION

The board adjourned for Executive Session at 12:00 p.m.

CASE PRESENTATION

The board reconvened from Executive Session and Case Presentations at 1:20 p.m.

PRESENTATIONS cont'd

Telepharmacy

Tim Fuller introduced Wade Shutz who presented the proposal to the board for Bartell Drugs to provide remote order entry services to other Bartell Drugs Pharmacies operating EnterpriseRx.

- Implementation of Enterprise Rx software has created a central database with VPN connection between stores and a common method of filling prescriptions.
- The goal is to create a more flexible workflow and a work environment more amendable to direct patient care.

- A log of user actions, for both Store A and Store B, and a step-by-step record of all dispensing are maintained by the software for system and personal quality determinations.
- Workflow
 - ✓ The patient presents the prescription to Store A. Store A scans the prescription and a digital image is sent to Store B.
 - ✓ Store B may perform data entry, interpretation, clarification, adjudication and drug utilization for Store A.
 - ✓ Store A performs physical preparation and dispensing, final pharmacist verification and ensures all data entry steps were done correctly.

MOTION: Christopher Barry moved that the board approve the request from Bartell Drugs to provide remote order entry services between the two Bartell Drugs Pharmacies mentioned in the presentation operating EnterpriseRx. They must report back to the board in six months. Rebecca Hille second. Dan Connolly recused himself. **MOTION CARRIED: 4-0.**

Use of Emergency Dose Kits

Grant Chester provided the board some background and introduced Denise Jason who presented the proposal by Genoa to provide E-Kits to residential treatment facilities and emergency treatment facilities.

- *Steps:*
 1. Verify Residential Treatment Facilities (RTF) license is in accordance with Department of Health (DOH).
 - Secure the license is current w/no restrictions regarding medication administration.
 2. Verify RTF has a dedicated Director or Prescriber licensed to handle E-kit items.
 - Secure the Director/Prescriber has a current license and Drug Enforcement Agency (DEA) allowing them to be in possession of E-kit items/stock
 3. Review location for storage of E-kit items
 - Verify storage of E-kit items/stock is in accordance with the restrictions as set by the Board of Pharmacy (BOP) for the storing of medications.
 - Security & Storage of medications
 - Inventory logging system
 - Destruction of expired/unused medications
 4. Submit a limited/restricted formulary to the BOP approval
 - Items to be limited to emergent needs
 - Medication therapy to be restricted to therapy no longer than 7 days.
 - PRN items to be dispensed in quantities of #15 or smaller
 - Controlled items to be overseen directly by licensed/employed RTF Director/Prescriber
 5. Pharmacy to conduct an onsite biannual inspection/audit of RTF.
 - Pharmacy to report any discrepancies to the Board of pharmacy as well as DOH.

Genoa is looking to allow continuity of care for those clients restricted into RTF either voluntarily or involuntarily for treatment evaluation/modification. Genoa will work directly with

each licensed RTF assuring that all regulating statutes are adhered, reporting all discrepancies to the BOP and DOH as required. We understand that we are working in uncharted waters with the operation of E-kits in the RTF setting, but Genoa is unique in its business model, we are not the typical corner pharmacy, we deal directly with the neediest of patients. Often these patients only other alternative for treatment is our State Hospital where the cost of care is extreme and the client's ability to work back into the community is limited.

Recommendations by the board of alternate acceptable methods:

1. Use a 24 hour retail or long term care pharmacy.
2. Use a 24 hour hospital pharmacy.
3. Use an automated drug dispensing system controlled by the pharmacy.
4. Use on-call staff to fill prescriptions after hours

MOTION: Christopher Barry moved that the board deny the request for Genoa to provide E-Kits to residential treatment facilities and emergency treatment facilities, and that Genoa should explore other options. The proposal is in conflict with pharmacy rule. Dan Connolly second.

MOTION CARRIED: 5-0.

DISCUSSION cont'd

Animal/Veterinary Drug Wholesalers

Susan Teil Boyer led the discussion with the board revisiting the issue of animal drug wholesalers delivering legend drugs to the end-user and to consider initiating rulemaking.

Pharmacist investigators have identified that veterinary drug wholesalers are “filling prescriptions for local veterinarians” and dispensing the drugs directly to the consumer. The Board of Pharmacy and veterinary staff met with the chair, pharmacy board, the state veterinarian, state assistant veterinarian and chair, veterinary board to discuss the best approach to resolving this issue. The recommendation is to propose a rule change that allows an exemption for the veterinary wholesaler to sell authorized veterinary medication products directly to the livestock farmer pursuant to the veterinarian's order.

MOTION: Dan Connolly moved that the board initiate rulemaking to allow an exemption for the veterinary wholesaler to sell authorized veterinary medication products directly to the livestock farmer pursuant to the veterinarian's order or prescription. Vandana Slater second.

MOTION CARRIED: 5-0.

Temporary Practice Permit

Doreen Beebe led the discussion asking the board to consider amending the proposal for rules to expand the temporary practice permit to 180 days.

January 2010 a proposal was brought to the board to do rulemaking to expand the temporary practice permit to 90 days. This expansion would accommodate the background checks and fingerprints which are taking a long time. The board approved the 90 days. It was later discovered that 90 days is not adequate time for fingerprints. Doreen discussed what other programs are doing regarding this issue.

MOTION: Rebecca Hille moved that the board amend the draft rule language to WAC 246-863-035 to extend the duration of the temporary practice permit to 180 days. Al Linggi second.
MOTION CARRIED: 5-0.

Rules Update

Doreen Beebe and Susan Teil Boyer updated the board on the rulemaking workload. Doreen went through the rules worksheet with the board and answered questions from the board. There were no updates from the board staff on their rules.

Letter to Governor – *Red Jacket Correspondence* WF#981729 regarding Cymbalta

Michael Nelson, a member of the public, had an opportunity to express his concerns regarding Cymbalta. The board discussed concerns expressed in his letter to the Governor. Mr. Nelson shared his experience with this drug and the adverse side effects. He would like to see this drug discontinued.

The Board of Pharmacy does not have the authority to ban a drug that has been approved by the Federal Drug Administration (FDA). The board referred Michael Nelson to the Med Watch Program to fill out a report

Correspondence

The board discussed correspondence, articles and other written materials with significance to or affecting the practice of pharmacy.

- ISMP Medication Safety Alert – January 2010
- NABP State News Roundup – January 2010
- The Quarterly “WRAPP-Up” w/Letter from FirstLab.
- Article: *Drug disposal is a good plan.*
- Article: *Putting docs in Duane Reade pays off*
- Article: SureScripts – *Going Against the Tide ...*
- Letter re: HB 2888
- Letter re: SB 6498
- Letter re: HB 2961

OPEN FORUM

There were no discussions in the Open Forum.

PRESENTATION OF AGREED ORDERS

EXECUTIVE SESSION

Board met in Executive Session to consult with legal counsel matters relating to enforcement actions.

CLOSED SESSION

Case presentations

Disciplinary Hearing --- Cancelled

March 12, 2010 9:00 a.m.

Respectfully Submitted by:

Leann George, Program Support

Approved on April 29, 2010

Gary Harris, Chair
Washington State Board of Pharmacy